

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
C.I.P.E. CLASSIFIER		48	9-2
FORMALITY REVIEW			

INDEX OF CLAIMS

- ✓ Rejected
- = Allowed
- (Through numeral) Canceled
- ÷ Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

Claim	Final	Original	Date
1			3/13/84
2			3/13/84
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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150			3/13/84

Claim		Date			
Final	Original	2/24	6/13	7/21	12/23
11	11	✓	✓	✓	✓
12	12				
13	13				
14	14				✓
15	15				
16	16				✓
17	17				
18	18				
19	19				✓
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31	31				
32	32				
33	33				✓
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41	41				
42	42				
43	43				
44	44				
45	45				
46	46	✓	✓	✓	✓
47	47	N	N	N	
48	48	N	N	N	
49	49	N	N	N	
50	50	✓	✓	✓	✓
51	51	✓	✓	✓	✓
52	52	✓	✓	✓	✓
53	53	✓	✓	✓	✓

Claim		Date			
Final	Original	2/24	6/13	7/21	12/23
54	54	✓	✓	✓	✓
55	55	✓	✓	✓	✓
56	56	✓	✓	✓	✓
57	57	✓	✓	✓	✓
58	58	✓	✓	✓	✓
59	59	✓	✓	✓	✓
60	60	✓	✓	✓	✓
61	61	✓	✓	✓	✓
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Claim		Date			
Final	Original	2/24	6/13	7/21	12/23
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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